T-587 P.001

F-067

JUN 1 3 2005

Complete if Known									
FFE.	Application	n Number	09/845,514						
FEE TRANSMITTAL				Filing Date		4/30/2001			
for FY 2005				First Nam	ed Inventor	Aoki			
Partent fees are subject to annual revision.				Examiner	Name	Ford, VL			
Application	taims small entity stat	us. See 37 Ci	FR 1.27	Art Unit		1645			
TOTAL AMOUNT	Attorney D	Attorney Docket No. D-2929CON							
METHOD OF PAYMENT (check of that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number 01-0885 Deposit Account Name Frank J. Uxa									
the Director is been suited the Director is been by authorized to: (check of that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the finding fee									
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and									
authorization on PTO-2038. FEE CALCULATION									
1 BASIC EILING	SEARCH, AND E	XAMINATIO	N FEES					1	
1. BASIO (TEME	FILING	FEES	SEAR	CH FEES		ATION FEES Small Entity	,	į.	
Application Ty		Fee (\$)	Fee (\$)	Small Enti Fee (\$)	Fee (\$)	Fee (\$)	;	Fees Paid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Piant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
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2. EXCESS CLA	M FEES						Fee (5)	Small Entity Fee (\$)	
For Description			d more than in	ma original oate	int		50	25	
Each claim over 20	or , for Roissues, each o talm over 3 or, for Reiss	: Jaim over zu en : ues oach inde:	endest dalm i Managari	nore than in the	original patent		200	100	
Muttiple Dependent	Claims			-			360	180 opendent Claims	
Total Claims	Extra Claim	<u>s Free</u>	( <u>\$)</u> <u>Fre</u>	Paid (\$)			Fee (\$)	Fee Paid (\$)	
-20	or HP = r of total claims paid fo	X or If greater th	en 20	<del></del>					
Indep. Claims	Extra Claim	<u>15 1599</u>	(\$) <u>Fee</u>	Paid (\$)					
-3	or HP =	X paid for, if great	er than 3						
HP = highest number of independent dams paid for, if greater than 3 Subtotal (2) 0									
3. APPLICATION SIZE FEE If the appellication and drawings exceed 100 sheets of paper, the application size (see due is \$250 (\$125 for small entity) for each additional 30 athlets or fraction									
thereof. Sed 35 U.S.C. 41(3)(1)(G) and 37 CPR 1.19(5).								Fee Pald (\$)	
Total Sheets Sheets Number of each additional 50 or fraction thereof									
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4. OTHER FEE	<u>5)</u> ste filing feo or cath/de	eclaration: \$13	30 fcc (\$85 sn	nali chtity disco	unt)				
U Surcrisings - Co	nectication: \$130 fe	c (no small en	ity discount)	-					
Non-English Specification: \$130 fee (no small entity discount)  1-month extension of time: \$120 fee (\$60 small entity discount)  RECEIVED									
⊠ 2-month exter	slon of time; \$450 fer	o (\$225 small o	entity discount	t)	OIPE/IA	<b>λ</b> P		450	
3-month ower	islen of time: \$1020 fe	cc (\$510 smal	cntity discou	nt)	- · -• · ·	•			
1 4-month exter	ision of time: \$1590 f	cc (\$785 amai	l entity discou	nt)	JUN 14	2005			
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☐ Information D	adosure Statement F	ce: \$180 tes (	no small entit	y ascount)					
☐ Notice of App	eal: \$500 fee (\$250 s	mail entity disc	o email embr	discount)					
Filing a Brief in Support of Appeal: \$500 fee (\$250 small emity discount)									
Request for Oral Hearing: \$1000 fee (\$500 small entity discount)  Utility Issue Fee: \$1400 fee (\$700 small entity discount)									
Cl. Recording each patent assignment per property (times number of properties): \$40 (ee (no small childy lies discount)									
Request for Continued Examination: \$790 fec (\$395 small entity discount)									
Other:						_	.labadad (4)		
Subtotal (4) 450									
SUBMITTED BY			Registration	n No.	25.540	Tohoboo	0 040	9-450-1750	
Name (Print/Type)	Frank J.)		(AMOIDEY)		25,612	Telephon	<del></del>		
Signature	///	inl.	MIN	سب		Date	Jun	e 13, 2005	

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JUN 1 3 2005

Appl. No. 09/845,514 Reply to Office Action of January 13, 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.

: 09/845,514

Confirmation No.

3428

Applicant

: Aoki et al.

: April 30, 2001

Filed Title

: MULTIPLE BOTULINUM TOXINS FOR TREATING

NEUROMUSCULAR DISORDERS AND CONDITIONS

TC/A.U.

: 1600/1645

Examiner

: Ford, V.L.

Docket No.

: D-2929 CON

Customer No. : 33197

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, to fax number 703-872-9306, on the date indicated below.

Mail Stop AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

RESPONSE TO JANUARY 13, 2005 OFFICE ACTION AND

PETITION FOR TWO-MONTH EXTENSION OF TIME

sir:

This response is being submitted in reply to the Office Action of January 13, 2005. A response was due April 13, 2005. Applicant hereby petitions for a two-month extension of time. A response with a two-month extension of time is due June 13, The Commissioner is hereby authorized to charge the extension of time fee (\$450.00) to Deposit Account No. 01-0885. Accordingly, this response is being timely filed. In response to the Office Action, please consider the following remarks:

Remarks/Arguments begin on page 2 of this paper.

06/14/2005 TL0111 00000046 010885 09845514

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